PTO/SB/06 (12-04)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number: Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-876 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) RATE (\$) FEE (\$) RATE (\$) **FEE (\$)** NUMBER EXTRA NUMBER FILED FOR BASIC FEE (37 CFR 1.16(a), (b), or (c)) ٠. SEARCH FEE (87 CFR 1.18(K), (I), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q)) ×50 TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(I)) × 200 = INDEPENDENT CLAIMS minus 3 = (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) 360 80 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()) TOTAL TOTAL * If the difference in column 1 is less than zero, enter *0" in column 2. APPLICATION AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 2) (Column 1) HIGHES. ADDI-CLAIMS EMAINING RATE (\$) ADDI-PRESENT RATE (\$) NUMBER TIONAL TIONAL EXTRA REVIOUSLY **AFTER** FEE (\$) FEE (\$) PAID FOR AMENDMENT x50 x 25 Total (37 CFR 1.16(1)) OR x200 = Milnus ×100 OR Application Size Fee (37 CFR 1.16(s)) 0 ماگ 180 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 CFR 1.16(I)) TOTAL ADD'L FEE -0 -0 OR ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST ADDI-CLAIMS RATE (\$) ADDI-PRESENT RATE (\$) NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY AFTER FEE (\$) FEE (\$) PAID FOR AMENDMENT ENDMENT x 50 = x 25 Minus Total cit ber 1.16(1) OR × 200 = x 100 Minus OR Independent (27 CFR 1.16(h)) Application Size Fee (37 CFR 1.16(s)) 360 180 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 20, enter "20". "If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.